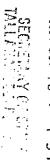
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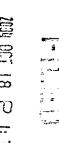
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## TRANSMITTAL LETTER

	tration Se ion of Cor	ction porations	•				
SUBJECT: _		C & B CONSTRUCTIO	·······				
		(Name of Limited	d Liability Company)				
The enclosed A	Articles of	Organization and fee(s) are so	ubmitted for filing.				
Please return a	ll corresp	ondence concerning this matte	er to the following:				
		LEON COLBERT					
-		C	Name of Person)				
		C & D CONCTDUOT	ON LLO				
		C & B CONSTRUCTI	Firm/Company)				
		2550 GULF BREEZE	PARKWAY	:	≓s ≧s	~	
			(Address)				=
				3		G 8- 130 Mg	4.
		GULF BREEZE, FL 3	32561 (State and Zip Code)			8	Address and the
		(Cny)	State and Zip Code)	:	-73 H	U	*
For further info	ormation	concerning this matter, please	call:			<del> :</del> 39	
	LE	ON COLBERT	at ( 850 ) 477-8357	•			
	(Name	of Person)	(Area Code & Daytime To	elephone Numbe	er)	-	
Enclosed is a	check fo	r the following amount:					
,		☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	S160.00 Certificate	of Sta		
			(additional copy is enclosed)	Certified ( (additional co		iclosed)	
	STRE	ET ADDRESS:	MAILING A	DDRESS:			
Registration Section Division of Corporations		Registration S Division of Co	Section				
409 E. Gaines Street		P.O. Box 632	7				
	Tallahassee, Florida 32399 Tallahassee, Florida 32314						

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

	<u> </u>	
ARTICLE II - Address:		
The mailing address and street address	of the principal office of the Limited Liability Compa	an
Principal Office Address:	Mailing Address:	
2550 GULF BREEZE PARKWAY	2550 GULF BREEZE PARKWAY	
GULF BREEZE, FL 32561	GULF BREEZE, FL 32561	
The name and the Florida street addres	ss of the registered agent are:	:
ELOIT	Nama	
	GULF BREEZE PARKWAY	
2550 G		
2550 G Florida	GULF BREEZE PARKWAY	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent/s Signature

(CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
WIGRAY - Managing Member	•	
MGR	LEON COLBERT	
•	7205 TWIN LAKES LANE	
	PENSACOLA, FL 32504	
MGR	KENNETH R. BROWN	
	1011 CORONADO	
	GULF BREEZE, FL 32561	
		٠
	FM S	
(Use attachment if necessary)		
NOTE: An additional autials mu	or the udded if an effective date is restitated	D 7 H
NOTE: All additional article int	ust be added if an effective date is requested.	7 <del>.2.3</del>
REQUIRED SIGNATURE:		الميسانة ا
X	1 A w	
A C	on itstud	
Signature of a men	nber or an authorized representative of a member.	
(In accordance with	section 608.408(3), Florida Statutes, the execution	
of this document co that the facts state	enstitutes an affirmation under the penalties of perjury ed herein are true.)	
	LEON COLBERT	
	Typed or printed name of signee	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)